CORRECTED COPY

Approved For Release 2001/03/04 : CIA-RDP81B00879R000900050005 CERTIFICATE OF SERVICE TO: (Major Air Command) CONTRACTOR SAC (DM8D) Firewel Company, Inc Offutt AFB, Nebr 3685 Broadway Forward to: AMC (LMSH) Buffalo 25, N.Y. Wright-Patterson AFB, DATE OF CERTIFICATE CONTRACT 31 July 1959 AF 33(600) HF-AF 1940 EXHIBIT NO. One 3. PERIOD OF CERT (Inclusive dates) 1. NAME OF CTSP (Last, First, and MI) 2. AF UNIT 1 July THRU 31 Jul 59 4080 Strat R Wg (DCM) 7. BILLABLE DAYS 5. SICK TIME (Inclusive dates) 4. VACATION TIME (Inclusive dates) 6. CONTRACT HOLIDAYS THRU FOIAb3a THRU None None 30 One THRU THRU AUTHORIZED OVERTIME HOURS WORKED DOUBLE TIME DOUBLE TIME DATE TIME AND TIME AND DATE TIME AND DOUBLE TIME None 9. DATES ON WHICH PREMIUM PAY SHIFTS WERE WORKED None TEMPORARY DUTY AWAY FROM HOME STATION (Enter hour and date of departure and return) 10. DEPARTED RETURNED DEPARTED DEPARTED RETURNED RETURNED 29 Jul 59 AUTHORIZED TRAVEL PERFORMED BY COMMERCIAL CARRIER(Including Taxicab, etc.) 11. MODE COST INCLUSIVE DATES Commercial Aro Co., Bryan, Ohio 29 Julynnu31 Jul Del Rio, Texas Airline THRU THRU AUTHORIZED PRIVATELY - OWNED CONVEYANCE TRAVEL (Except on-base mileage) 12. TOLLS MILES INCLUSIVE DATES FROM N/A THRU THRU THRU 13. AUTHORIZED ON BASE MILEAGE BY PRIVATELY - OWNED CONVEYANCE: N/A GOVERNMENT TRANSPORTATION REQUESTS USED 14. TO DATE ISSUED ISSUING AGENCY N/A 15. GOVERNMENT QUARTERS WERE USED ON THE FOLLOWING DATES: N/A

| Approx  | ed For Release 2                                    | 001/03/04 : 0  | IA-RDP81B0                          | 00879 0009000500<br>TE PLACE OF LAST ASSIG            | 05-7                       |
|---|---|--|-------------------------------------|---|----------------------------|
| N/ADATE OF DEPART                               | UKE:  |  | HIS AF UNIT, STA                    | TE PLACE OF LAST ASSIC                                | SNMENT AND                 |
| N/A   | DEPARTED (Place)                                    |  |                                     | ON (Date)   |                            |
| N/A   | INT CERTIFICATE SORW                                | AITTED FROM TH   | S AF UNIT, STAT                     | E DATE OF DEPARTURE:                                  |                            |
|   | WITER STATES FOR AVI                                |  |                                     |   |                            |
| l •   | NITED STATES FOR OVE                                | ERSEAS DUTY FR   | ОМ                                  |   |                            |
| N/A   | T 55 6 T AT 56 5 DOUGNE                             |  | (Port)                              | ON (Date)   |                            |
|   | TED STATES FROM OVE                                 | RSEAS DUTY AT  |                                     |   |                            |
| N/A   | V WUEDE OVEDSEAS DU                                 | ()   | Port)                               | ON (Date)   |                            |
| N/Keasons)                                      | Y WHERE OVERSEAS DU                                 | TY WAS PERFORM   | MED DURING THIS                     | PERIOD (Unless prohibited                             | l for security             |
| -   | RMATION AND REMARKS                                 | ):   |                                     |   |                            |
|   | is a corrected c                                    |  |                                     |   |                            |
|   |   |  | Dhio on offi                        | cial buiness trip.                                    | References                 |
| attached letter.                                |   |  | ــــــ بنن <b>و</b> نسبت            | Cara Control of The                                   | HOT OT CHICKE              |
| <del>-</del>                                    | n, Ohio, 29,30 an                                   | d 31 Jul 59.   |                                     |   |                            |
|   |   |  |                                     |   |                            |
|   | V <u>z</u> :  |  |                                     |   |                            |
|   |   |  |                                     |   |                            |
|   | FOIAb3a   |  |                                     |   |                            |
| 22. CERTIFICATION:                              | Ic  | tems 1   | thru 21 above is                    | true and correct to the be                            | st of my know-             |
| ledge and belief.                               |   |  |                                     |   | •                          |
| an appropriately                                |   | A management of the second   |                                     | (Signature of CTSP)                                   |                            |
| 23. CERTIFICATION:<br>ed in a satisfactory      | Ic  | nowled   | lge and belief, the                 | e services reported above                             | were perform-              |
| ity, and that approx                            | oriate written orders hav                           | ve been issued or  | requested with                      | rized in advance by comp<br>the following exceptions: | etent author-              |
|   |   | ve been looked of  | requested, with                     | the following exceptions.                             |                            |
|   | 1   | 9  |                                     |   |                            |
|   |   | 1  |                                     |   |                            |
|   | !   |  |                                     |   |                            |
|   |   |  |                                     |   |                            |
|   |   |  |                                     |   |                            |
|   |   |  |                                     |   |                            |
|   |   | * #  |                                     |   |                            |
| •   |   |  |                                     | FOIAb3a   |                            |
| (If services were no                            | ot satisfactory, complet                            | tig and the same of the same o |                                     |   |                            |
| NAME  | <b>7</b> 0141-0-                                    |  |                                     | ired)   | (Facsimile                 |
|   | OIAb3a  |  |                                     |   | $\mathcal{D}_{\mathbf{A}}$ |
| AFSN  | ORGANIZATION  |  |                                     |   | Jr. (2)                    |
| 35808A  | 4080 Strat R Wg                                     |  |                                     |   |                            |
| INSTRUCTIONS FOR I<br>a. Items not applicable   | PREPARATION:<br>will be indicated by N              | 7/A.   |                                     |   |                            |
| b. The period covered                           | by a certificate will not                           | t include more tha   | an one calendar m                   | nonth.  |                            |
| c. ITEM 6. The numbe<br>If they were work da    | r of contract holidays is                           | n the period will<br>in Item 8 as over   | be entered regard                   | lless of whether they were                            | e work days.<br>overtime   |
| d. ITEM 7. The number contract holidays. (      | r of billable days is the<br>Authorized travel days | e total number of<br>will be included  | days in the period<br>in this item) | d, less vacation days, sid                            | k days, and                |
| e. Entries in Items 8, 1<br>needed, Item 21 may | 0, 11, 12, and 14, may be used.                     | be double-spaced   | l or single-spaced                  | d as required. If additiona                           | ıl space is                |

f. Month and year may be omitted when entering dates, except for date of certificate and Item 3. All other dates must

g. ITEM 23. If services were not satisfactory, or if there is disagreement as to the services performed, the AF

be within the period covered by the certificate.

Supervisory Officer must explain in Item 23.

| *   | ,  |                                   | or gelease.  |                                | RTIFICATE   |   | RDP81B008   | 79R00  | 09000500         | 005-7              |                           |  |
|---|--|-----------------------------------|--|--------------------------------|-------------|---|---|--|------------------|--------------------|---------------------------|--|
| CONTRACTOR Firewel Company, Inc. 3685 Broadway Buffalo 25, N.Y. |  |                                   |  |                                |             | To: (Major Air Command) SAC (DM8D) Offutt AFB, Nebr Forward to: AMC (LMSH) Wright-Patterson AFB, Ohio |   |  |                  |                    |                           |  |
| 1   | CONTRACT   |                                   |  |                                |             |   | DATE OF CERTIFICATE   |  |                  |                    |                           |  |
|   | 600) HF-AF   |                                   | ) EXHIBIT N<br>First. and MI)  |                                |             | 31  | L AUG 1959  | <del>                                     </del> |                  | ,                  | -granementary surrections |  |
| 36  | 2 01 015   | 7718t. and 1/11)                  | 2. AF UNIT<br>4080 Strat R Wg (DCM)  |                                |             | 9. PERIOD OF CERT (Inclusive dates).  1 Aug THRU 31 Aug 59  |   |  |                  |                    |                           |  |
| 4. VAC  | - VACATION TIME (Inclusive dates)                    |                                   |  | S. SICK TIME (Inclusive dates) |             | dates)  | 6. CONTRACT   |  | 7. BILLABLE DAYS |                    |                           |  |
| 11 Aug тняч 24 Aug 59<br>тняч                                   |  |                                   | None THRU  |                                |             | •   | None  |  | 21               |                    |                           |  |
| 8.  | ****   | •                                 | · · · · · · · · · · · · · · · · · · ·  | AUTHO                          | RIZED OVER  | TIME  | E HOURS WORKE   | b • •  | <del></del>      | <u> </u>           |                           |  |
| DATE  | TIME AND   | +                                 | DOUBLE TIME  | DATE                           | TIME AND    |   | DOUBLE'TIME   | DATE   | TIME AND         | DOUE               | LE TIME                   |  |
| None  |  |                                   |  |                                |             |   |   |  |                  |                    |                           |  |
| -110220   |  |                                   | Printed Annual Confession Confess |                                |             |   | andriganise armographic Statement and appropriate the statement |  |                  |                    | <del></del>               |  |
|   |  |                                   | -  |                                |             |   | er in en                    |  |                  |                    |                           |  |
| 9. DAT  | ES ON WHICH  | PRE                               | MIUM PAY SHIFT   | S WERE                         | WORKED      |   |   | L  | <u> </u>         |                    | <del></del>               |  |
| None  |  |                                   |  |                                |             |   |   |  |                  |                    |                           |  |
| 10.   | TE   | MPOR                              | ARY DUTY AWA   | Y FROM                         | HOME STATI  | ON (  | (Enter hour and de  | te of den  | erture and ref   | um)                |                           |  |
| DEF   | PARTED   |                                   | ETURNED  |                                | ARTED       |   | RETURNED  | <del></del>                                      | PARTED           |                    | URNED                     |  |
|   |  | 10                                | Aug 59   |                                |             |   |   |  |                  |                    |                           |  |
| 11,   | Al   |                                   |  | PERFO                          | RMED BY COM | MEF   | RCIAL CARRIER   | Includine  | Taxicab, etc     | 1                  |                           |  |
| INCLUSIVE DATES   |  | THORIZED TRAVEL PERFORMED BY COMM |  |                                |             | TO MODE   |   |  |                  |                    | COST                      |  |
| INCLU   | SIVE DATES   |                                   |  |                                |             |   |   |  |                  | <del></del>        |                           |  |
|   |  | g W                               | right Patte  | rson A                         | AFB, Ohio   | Fi  | rewel Co., I  | Buffalo  | , N.Y.           | Commerc<br>Airline | ial                       |  |
| 3 Aug   |  | g W                               | right Patte  | rson I                         | AFB, Ohio   | Fi  | rewel Co., H  | Buffalo  | , N.Y.           |                    | lal.                      |  |
| 3 Aug   | THRU 10 AT<br>THRU<br>THRU                           |                                   |  |                                |             | 1   |   |  |                  |                    | ial                       |  |
| 3 Aug   | THRU 10 AT<br>THRU<br>THRU                           |                                   |  | ELY - 0                        |             | 1   | NCE TRAVEL (E   | cept on-b  |                  | Airline            |                           |  |
| Aug  12. INCLUS   | THRU 10 AU THRU THRU                                 |                                   | DRIZED PRIVATI   | ELY - 0                        |             | 1   | NCE TRAVEL (E   |  |                  |                    | ial                       |  |
| B Aug  12. INCLUS  N/A  | THRU 16 AT THRU THRU A SIVE DATES                    |                                   | DRIZED PRIVATI   | ELY - 0                        |             | 1   | NCE TRAVEL (E   | cept on-b  |                  | Airline            |                           |  |
| 3 Aug 12. INCLUS  | THRU 10 AT THRU THRU  SIVE DATES THRU                |                                   | DRIZED PRIVATI   | ELY - 0                        |             | 1   | NCE TRAVEL (E   | cept on-b  |                  | Airline            |                           |  |
| Aug  12. INCLUS  N/A  | THRU 16 AT THRU  THRU  SIVE DATES  THRU  THRU        |                                   | DRIZED PRIVATI   | ELY - 0                        |             | 1   | NCE TRAVEL (E   | cept on-b  |                  | Airline            |                           |  |
| Aug  12. INCLUS  N/A  | THRU 16 AT THRU  THRU  ASIVE DATES  THRU  THRU  THRU | <b>VOTH</b> C                     | DRIZED PRIVATI   | ELY-O                          | WNED CONVE  | YAN   | NCE TRAVEL (E)  | cept on-b  |                  | Airline            |                           |  |
| Aug  12. INCLUS  N/A  | THRU 16 AT THRU  THRU  ASIVE DATES  THRU  THRU  THRU | <b>VOTH</b> C                     | PRIZED PRIVATI   | ELY- O                         | WNED CONVE  | YAN   | NCE TRAVEL (E) T  | cept on-b  |                  | Airline            |                           |  |
| 12. INCLUS N/A  19. AUT N/A 14.                                 | THRU 16 AT THRU  THRU  ASIVE DATES  THRU  THRU  THRU | <b>VOTH</b> C                     | PRIZED PRIVATI   | PRIVAT                         | WNED CONVE  | YAN   | NCE TRAVEL (E) T  NVEYANCE: MIL                                 | cept on-b  |                  | Airline            |                           |  |
| 12. 1NCLUS N/A 13. AUT N/A 14.                                  | THRU 16 AT THRU THRU THRU THRU THRU THRU THRU THR    | <b>VOTH</b> C                     | PRIZED PRIVATI<br>FRO<br>E MILEAGE BY I  | PRIVAT                         | WNED CONVE  | YAN   | NCE TRAVEL (E) T  NVEYANCE: MIL ON REQUESTS U                   | cept on-b  |                  | TOLLS              |                           |  |

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16. IF THIS IS THE INITIAL CERTIFICATE SUBMITTED FROM THIS AF UNIT, STATE PLACE OF LAST ASSIGNMENT AND 17. IF THIS IS THE FINAL CERTIFICATE SUBMITTED FROM THIS AF UNIT, STATE DATE OF DEPARTURE: 18. DEPARTED THE UNITED STATES FOR OVERSEAS DUTY FROM N/AON (Date) 19. ARRIVED THE UNITED STATES FROM OVERSEAS DUTY AT N/A ON (Date) 20. NAME OF COUNTRY WHERE OVERSEAS DUTY WAS PERFORMED DURING THIS PERIOD (Unless prohibited for security  $N/A^{reasons}$ 21. ADDITIONAL INFORMATION AND REMARKS: This certificate is a corrected copy. At Wright Patterson AFB, Ohio 3 and 4 Aug 59, Official buiness trip, reference attached At Firewel Co., Buffalo, N.Y. from 5 Aug to 10 Aug 59 for refresher course. On vacation 11 Aug thru 24 Aug 59. STATINTL 1 thru 21 above is true and correct to the best of my know-22. CERTIFICATION: I ledge and belief. (Signature of CTSP) edge and belief, the services reported above were perform-23. CERTIFICATION: I reported were authorized in advance by competent authored in a satisfactory m or requested, with the following exceptions: ity, and that appropri

(If services were not satisfactory, complete written refort has been prefared and forwarded)

STATINTL

AFSN

35808A

ORGANIZATION

4080 Strat R Wg (DC

La. Co

acsimile

STATINTL

INSTRUCTIONS FOR PREPARATION:

a. Items not applicable will be indicated by N/A.

b. The period covered by a certificate will not include more than one calendar month.

- c. ITEM 6. The number of contract holidays in the period will be entered regardless of whether they were work days. If they were work days, this will be shown in Item 8 as overtime even if contract does not provide for overtime
- premium pay. Reimbursement will be made for holiday work in accordance with applicable contract.

  d. ITEM 7. The number of billable days is the total number of days in the period, less vacation days, sick days, and contract holidays. (Authorized travel days will be included in this item)
- e. Entries in Items 8, 10, 11, 12, and 14, may be double-spaced or single-spaced as required. If additional space is needed, Item 21 may be used.
- f. Month and year may be omitted when entering dates, except for date of certificate and Item 3. All other dates must be within the period covered by the certificate.
- g. ITEM 23. If services were not satisfactory, or if there is disagreement as to the services performed, the AF Supervisory Officer must explain in Item 23.

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